Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

Attorney Docket Number NPT037US

PTO/SB/01 (12-97)
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DECLARATION F	First Named Inve	entor	Paul Lapstun						
DES	COMPLETE IF KNOWN								
PATENT APPLICATION (37 CFR 1.63)		Application Numb	er	/					
(0. 0	,	Filing Date							
Declaration C Submitted OR	Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Group Art Unit		_					
with Initial Filing		Examiner Name		<u></u>					
As a below named invent	or, I hereby declare that:								
My residence, post office a	ddress, and citizenship are as	stated below next to my	name.						
I believe I am the original, I	first and sole inventor (if only the subject matter which is cl	one name is listed below)	or an original,	first and joint inven	itor (if plural titled:				
		aimed and for which a pac	sin is sought o	i dio ii roma					
Symmetric	rags	•			i				
the specification of which	(Title	of the Invention)							
is attached hereto	(7100	or and miremany	•						
OR was filed on (MM/D	pmm	as United	1 States Applic	ation Number or P	CT International				
Application Number and was amended on (MM/DD/YYYY) (if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as									
amended by any amendme	ent specifically referred to abo	ve.							
I acknowledge the duty to o	lisclose information which is n	naterial to patentability as	defined in 37 (CFR 1.56.					
I hereby claim foreign priori certificate, or 365(a) of any America, listed below and ha or of any PCT international a	ity benefits under 35 U.S.C. PCT international application ave also identified below, by c application having a filing date	119(a)-(d) or 365(b) of an which designated at lea hecking the box, any forei before that of the applicat	ny foreign app st one country gn application tion on which p	lication(s) for pate y other than the U for patent or inver priority is claimed.	ent or inventor's United States of Intor's certificate,				
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed		NO NO				
2003900983	Australia	March 4, 2003							
·				l 무	H				
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:									
I hereby claim the benefit	under 35 U.S.C. 119(e) of an	United States provisiona	application(s)	listed below.					
Application Numbe		(MM/DD/YYYY)							

[Page 1 of 2]

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Additional inventors are being named on the

s sign (+) Inside this box + + Approved for use through 9/30/00. OMB 0651-0032
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a valid OMB control number. Utility or Design Patent Application DECLARATION -I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentiability as defined in 37 CFR 1.56 which became available between the filling date of the prior application and the national or PCT international filing date of this application **Parent Patent Number** U.S. Parent Application or PCT Parent **Parent Filing Date** (if applicable) (MM/DD/YYYY) Number Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Pater Place Custome and Trademark Office connected therewith: Customer Number Number Bar Code OR Registered practitioner(s) name/registration number listed below Label bere Registration Registration Name Number Name Number Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto Direct all correspondence to: X Customer Number OR Correspondence address below 24011 or Bar Code Label Kia Silverbrook Name Silverbrook Research Pty Ltd Address 393 Darling Street Address 2041 NSW ZIP Balmain State City 61-2-9555-7762 Telephone 61-2-9818-6633 Fax Australia Country I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. A petition has been filed for this unsigned inventor Name of Sole or First Inventor: Family Name or Surname Given Name (first and middle [if any]) **LAPSTUN PAUL** ebruary Inventor's 18, 2004 Signature Norwegian NSW Australia Balmain Country Citizenship Residence: City 393 Darling Street **Post Office Address** Post Office Address Australia NSW Balmain 2041 Country City supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

NPT037US

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PTO/SB/02A (11-00)
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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1__ of ___ 1

Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any])		Family Name or Surname						
KIA			SILVERBROOK					
Inventor's Signature				DateFebruary 18, 2004				
Residence: City Balmain	State	NSW	Country Australia Citizen		Citizenship Australian			
Mailing Address 393 Darling Street								
Mailing Address								
City Balmain	State N	sw	ZIP 2041 Country Austral		ry Australia			
Name of Additional Joint Inventor, if an	y:		A petition has been	filed for th	is unsigned inventor			
Given Name (first and middle [if any])			Family Name or Surname					
	_							
Inventor' s Signature					Date			
			Country	Citizenship				
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Mailing Address		<u> </u>						
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Name of Additional Joint Inventor, if any:								
Given Name (first and middle [if any])			Family Name or Surname					
Inventor's Signature					Date			
Residence: City State			Country		Citizenship			
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